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**Agenda**  
**CCORP Clinical Advisory Panel (CAP) Meeting**  
**400 R Street, Room 471, Sacramento, CA 95811**  
**Tuesday May 24, 2011, 9:00 am**

**Call to Order** – Robert Brook, M.D., Chair

**1) Introductions**

**2) Approval of Minutes of October 1, 2010 Meeting**

**3) Director's Report** - David Carlisle, M.D., Ph.D.

**4) CCORP Program Update** - Holly Hoegh, Ph.D.

Summary of release of 2007 public report, status of 2007-2008 public report, statewide trends in CABG and Percutaneous Coronary Intervention (PCI) usage, update on data collection and correction activities for 2010 and 2011, and other program updates

**5) Results of the 2009 CCORP Audit** – Beate Danielsen, Ph.D., University of California, Davis, OSHPD contractor

Presentation of results of the 2009 medical chart data reabstraction from 18 CCORP hospitals

**6) Discussion and recommendations regarding changes to CCORP clinical data elements submitted by hospitals:** Holly Hoegh, Ph.D. and Richard White, M.D., University of California, OSHPD Contractor

The Society of Thoracic Surgeons recently issued version 2.73 of the Adult Cardiac Database currently planned to be effective July 1, 2011. Drs. Hoegh and White will present proposed changes to the CCORP data elements including proposed new data elements to improve CABG risk models. OSHPD would like to implement changes concurrent with STS 2.73. OSHPD requests CAP recommendations on which data elements should be added, changed, or dropped through the regulatory process (Action Item).

**7) Mortality as a risk-adjusted outcome for CABG + Valve surgery** - Zhongmin Li, Ph.D., University of California, Davis, OSHPD contractor

OSHPD presented preliminary methods and a risk-adjusted model for CABG + Valve at the June 2010 CAP meeting.

- a) Presentation on the revised methods and risk model for the outcome measure
- b) Request for approval of risk model and methods for generating hospital-level results for a public report (Action Item)



- 8) Post-operative dialysis requirement as a risk-adjusted outcome for isolated CABG surgery** – Zhongmin Li, Ph.D., University of California, Davis, OSHPD contractor
- a) Presentation on the risk model and methods for developing the outcome measure
  - b) Request for approval of risk model and methods for generating hospital-level results for a public report (Action Item)
- 9) Hospital readmission as a risk-adjusted outcome for isolated CABG surgery** – Beate Danielsen, Ph.D., University of California, Davis, OSHPD contractor
- a) Presentation on the risk model and methods for developing the outcome measure
  - b) Request for approval of risk model and methods for generating hospital-level results for a public report (Action Item)
- 10) Mortality as a risk-adjusted outcome for isolated CABG surgery** – Zhongmin Li, Ph.D., University of California, Davis, OSHPD contractor
- a) Presentation on the risk model and methods for developing the outcome measure
  - b) Request for approval of risk model and methods for generating hospital-level results for a public report (Action Item)
- 11) Post-operative stroke as a risk-adjusted outcome for isolated CABG surgery** – Zhongmin Li, Ph.D., University of California, Davis, OSHPD contractor
- a) Presentation on the risk model and methods for developing the outcome measure
  - b) Request for approval of risk model and methods for generating hospital-level results for a public report (Action Item)
- 12) Upcoming CCORP Hospital-Level Report** - Holly Hoegh, Ph.D.
- Discussion of OSHPD's recommendations on 2009 report contents (Action Items)
- a) 2009 risk-adjusted isolated CABG mortality rates for hospitals
  - b) 2008-2009 risk-adjusted isolated CABG post-operative inpatient stroke rates for hospitals
  - c) 2008-2009 risk-adjusted isolated CABG post-operative dialysis requirement for hospitals
  - d) 2008-2009 risk-adjusted isolated CABG readmission rates for hospitals
  - e) 2008-2009 risk-adjusted CABG + valve mortality rates for hospitals
  - f) 2009 internal mammary artery usage rates for hospitals
  - g) OSHPD recommends not including a volume/outcomes analysis
- 13) Definition of Isolated CABG**
- a) Application of Isolated CABG definition to specific cases
  - b) Discussion of and possible recommendation for revision of definition
    - i) Lung decortication (Action Item)

#### **14) Public comment**

#### **Adjourn**

The panel may take action on any agenda item. Reasonable accommodation requests may be directed, at least five (5) working days in advance of this event, to Holly Hoegh at (916) 326-3868. OSHPD will ensure that it makes every effort to fulfill the request.

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